REMARKS

Claims 1-22 are pending in the application.

Favorable reconsideration of this rejection, in view of the following explanations, is respectfully requested.

Claim Objections

Claim 1 has been amended. The end of the first paragraph now has a comma as requested.

Claim Rejections – 35 U.S.C 103

Examiner rejects claims 1-22 under 35 U.S.C 103(a) as being unpatentable over **Microsoft Screen Captures** (Microsoft Windows Version 4.0, Copyright 1981-1988, Figures 1-11) in view of **Sieracki et al**. (US Patent No. 6,308,201 B1).

Favorable reconsideration of this rejection, in view of the following explanations, is respectfully requested.

The present application discloses a medical parameter evaluation system comprising: a *boundary* input device for moving and setting variable intermediate range *boundaries* of the evaluated parameter, a label input device for associating labels with parameter regions and a rule input device for devising rules for recommended outputs, related to the parameter boundaries. An input parameter typically represents medical or like measurement results of a respective individual. The system may be used as a medical monitoring kit.

Sieracki et al discloses a fully automated computer controlled system for adjustment of neuron-stimulation implants used in pain therapy and in treating neurological dysfunction. The system includes a patient interactive computer and a universal transmitter embedded into the interactive computer. The patient interacts with the system through the interactive computer. The computer which provides a consistency check of the data entered by the user, deletes inconsistent data and requests the user to re-enter data.

Microsoft discloses security setting screens of Windows operating system, implemented graphically as a slider. The slider position, set by the user, is used by the system to determine the security level. The full slider range is partitioned into several *regions*, each associated with a predefined security level according to system restriction of third party cookies. The regions are *not* variable and moving the

boundaries has no meaning in this context. The only feature that moves is the *slider,* by contrast to the present invention where it is the *boundaries* that are moved in order to reconfigure the *regions in between.*

Claim 1 of the present application cites a parameter evaluation system operable for **"setting *internal boundaries* at any of substantially continuous locations inside a variation range of one or more continuous parameters".** The internal boundaries are customized for individual patients, to define a plurality of internal regions within the variation range. Customizing for individual patients allows the same parameter to be treated differently in different circumstances. Thus blood pressure may be considered to be dangerous at different thresholds for heart patients and for pregnant women. A doctor simply moves the boundaries to levels suitable for the patient currently in front of him and then sends the patient home with the calibrated monitoring device. The system includes further an input label device, an input rule device and an output device.

Independent claim 21 of the present application cites a method for associating a series of outputs with detected levels of continuously varying medical parameters. The user slidably sets *boundary levels* of any of the continuous locations inside the variable range to customize for the individual patient as before. Each parameter is then further customized by associating rules with each region and with combination of regions of different parameters to associate a series of outputs with the regions and combination of regions. The user can associate labels and rules with parameter regions or a combination of parameter regions.

Examiner rejects claims 1-13, 15-17, 19-22 as being unpatentable over **Microsoft** in view of **Sieracki et al.** Examiner argues that privacy setting, disclosed in the prior art, is selected by moving a slider present in the user screens, along the internal boundaries inside a variation range of the continuous parameters. However there is a clear visual and operational distinction between the Microsoft sliders and the boundary entry input device of the present application. Fig.1 illustrates the boundary input device of the present application and Fig.2 illustrates the Microsoft screen capture slider. The boundary entry input device of the present application uses *boundaries, movable by the user, to partition the parameter range into several regions.* The user set boundaries are then used to determine the category during subsequent measurements using the parameter. Microsoft Screen Capture slider, in

contrast, *is movable by the user to set the operational parameter according to any of the regions predefined by the operating system.*
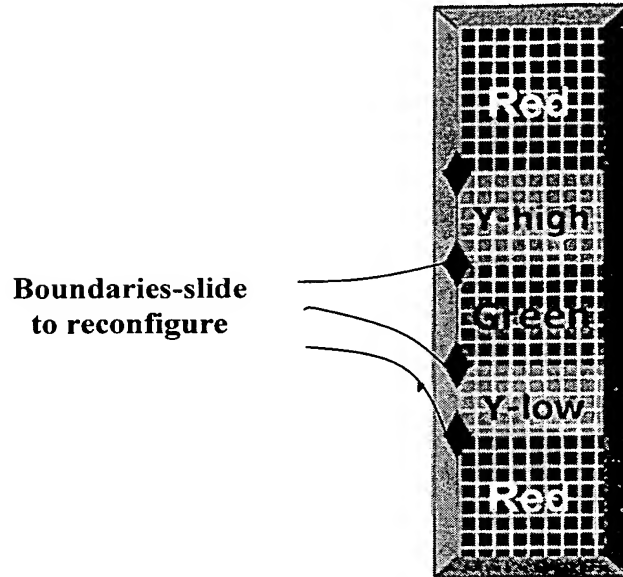

Boundaries-slide
to reconfigure

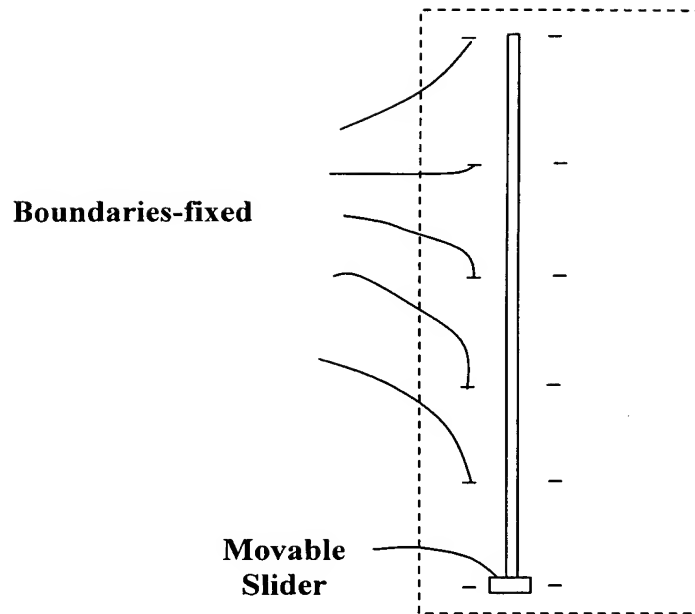**Fig. 1: The Boundary Input Device of the present application**

Fig. 2: Microsoft Screen Capture slider

Claim 1 of the present application cites a medical parameter evaluation system, comprising a boundary input device, user operable for setting internal boundaries at any of continuous locations inside a variable range of continuous parameters, to define a plurality of internal regions within the variable range, a label input device, a rule input device and an output device

Sieracki et al does not mention or imply an input device, operable for *setting internal boundaries* of parameters. Microsoft describes a slider input device with regions set by the operating system and a slider used to set an operational level. Microsoft does not mention or imply a boundary entry input device comporising a bar with sliding intermediate *boundaries*. Neither does the combination of Microsoft and Sieracki teach sliding intermediate boundaries for defining regions.

Therefore claim 1 should be respectfully allowed.

Independent claim 21 of the present application as amended cites a method of associating a series of outputs with detected levels of a continuously varying parameter. According to the method, the user slidably sets internal *boundary* levels at any of *continuous* locations inside a variable range of the parameter by sliding *boundaries*. The parameter is individually customized for a specific patient by setting the boundaries and associating rules with each region and with combination of regions of different parameters. A user associates categorization labels and rules with each of the defined internal regions, rules and with combinations of the internal regions.

Sieracki et al does not mention or imply a method allowing the user to set intermediate, boundaries inside a variable range of a parameter. Microsoft does not mention or imply setting boundary levels of parameters by the user. Neither does the combination of Microsoft and Sieracki teach sliding intermediate boundaries for defining regions.

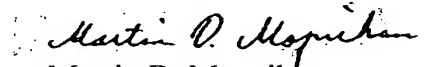Therefore claim 21 should be respectfully allowed.

Claims 2-20, 22 are respectfully believed to be allowable since they are dependent on the above independent claims.

All the matters raised by the Examiner are believed to have been dealt with and it is respectfully submitted that the application is now in order for acceptance.

In view of the foregoing, it is respectfully submitted that all the claims now pending in the application are allowable.

An early Notice of Allowance is therefore respectfully requested

Respectfully submitted,

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